



PATENT

Appl. No. 09/536,056

Attorney Docket No. 450100-02414

#9/A

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : YOKOTA, Teppei *et al.*
Appl. No. : 09/536,056
Filed : March 27, 2000
Title : NON-VOLATILE RECORD MEDIUM, RECORDING METHOD, AND
RECORDING APPARATUS
Art Unit : 2134
Examiner : TRAN, Tongoc

745 Fifth Avenue
New York, NY 10151

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Samuel S. Lee, Reg. No. 42,791

(Name of Applicant, Assignee or Registered Representative)

Signature

April 12, 2004

Date of Signature

RECEIVED

APR 19 2004

Technology Center 2100

AMENDMENT

Mail Stop: Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action of January 12, 2004, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2.

Remarks/Arguments begin on page 8.

2134



PATENT
450100-02414

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Teppei YOKOTA et al.
Serial No. : 09/536,056
For : **NON-VOLATILE RECORD MEDIUM, RECORDING METHOD, AND RECORDING APPARATUS**
Filed : March 27, 2000
Examiner : TRAN, Tongoc
Art Unit : 2134

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Technology Center 2100

MAIL STOP NON-FEE AMENDMENT
COMMISSIONER FOR PATENTS
Alexandria, VA 22313-1450
Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required.
- ☐ The fee has been calculated as shown below.
- ☐ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional fee
Total claims	21	Minus	21 =	0 x	\$18(9)	= \$0
Independent claims	3	Minus	3 =	0 x	\$86(43)	= \$0
Total additional fee for this amendment						= \$0

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
** If the highest number of total claims previously paid for is less than 20, write "20" in this space.
*** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

- ☐ This application contains a multiple dependent claim. The required fee of \$290 (\$145) has been previously paid ☐, or is paid herewith ☐.
- ☐ This response is being filed within the _____ month following the expiration of the term originally set therefor. This is a petition to request a -month extension of time. A check covering the cost of the petition is enclosed.
- ☐ A check in the amount of \$ _____ .00 is attached, which covers the cost of ☐ additional claims and ☐ -month petition for extension of time.
- ☐ Charge \$_____ to Deposit Account No. 50-0320.
- ☒ Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

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Samuel S. Lee, Reg. No. 42,791
(Name of Applicant, Assignee or Registered Representative)

Signature
April 12, 2004
Date of Signature

FROMMER LAWRENCE & HAUG, LLP
Attorneys for Applicant(s)

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